

Doctor Visit Worksheet

Write down your loved one's answers to the questions below. Then, use the answers to talk to a doctor about any concerns.

This worksheet is provided by the Home Instead Senior Care® network.

Doctor Name:	Date of Visit:
<i>What is your main health concern right now?</i>	
<i>Do you have any new symptoms, such as pain?</i>	
<i>What changes have you noticed in your health since your last visit?</i>	
<i>If you currently take medication for pain or any other symptom, how is it working?</i>	
<i>Have you started any new medications? What are they? Do you have any side effects from the medicines you take?</i>	
<i>Have you seen other doctors before this visit? Have you had diagnostic tests or other treatments? Do you want to discuss those results?</i>	

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Use this page to write down what your loved one and the doctor discussed.

<i>Tests ordered</i>
<i>Test results</i>
<i>Recommendations</i>
<i>Medication instructions</i>
<i>Dietary restrictions</i>
<i>Next steps</i>
<i>Other notes</i>

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